Leeds Health and Wellbeing Board

Reviewing the year

2018 – 2019

Making Leeds the Best City for Health and Wellbeing where the poorest improve their health the fastest
Foreword

By Councillor Rebecca Charlwood
Chair of Leeds Health and Wellbeing Board

The past 12 months has seen a huge amount of work across Leeds to improve people’s health and wellbeing. I am glad to see significant improvements in health and care in the city as we better connect people and services and integrate our community, primary care and hospital services. We continue to play a lead role in the region, and have influenced the development of a community focused approach to health and care in the West Yorkshire and Harrogate Health and Care Partnership. We have also hosted national conferences with the King’s Fund, delivered an excellent digital health festival and hosted many visits from people looking to learn from our health system.

The Leeds approach is based on compassion, cooperation and integration. This is paying dividends and when comparing ourselves against other Core Cities – Leeds and the other seven biggest cities in England outside of London – we score well and know Leeds is in a strong position as the Best City for Health and Wellbeing. People in Leeds tend to be happier and are mostly in good health.

This is a testament to the strength of our partnership working, highlighted in a recent review by the Care Quality Commission as a real strength for the city and our residents. The Leeds Health and Wellbeing Board brings together senior decision-makers from the council, local NHS services, third sector and Healthwatch Leeds to create the environment to agree city-wide priorities, and to work together to tackle emerging issues.

We also know there are areas for improvement, especially in tackling inequalities that exist in this city. We are united in our ambition that we improve the health of the poorest the fastest, and we believe the vibrant community sector is one of the keys for succeeding in this. Community organisations in this city have a proven track record of connecting with some of our most vulnerable residents, in our most deprived communities. It is this experience that we rely on to improve health and care outcomes for the poorest residents.

Another area we have really improved in the past 12 months, is working with you, our residents. Through our Big Leeds Chat event, we brought senior managers and staff from the health and care sector together with residents, giving you a voice on what matters most to you and how you think we should improve health and care in the city.

We are considering what you told us, and putting it at the centre of our decision-making. We will also be offering more ways for you to get involved in co-producing solutions.

We want to connect you with what’s available in your local community, so that you can improve your health, and access the services you need closer to your home. We have made progress on this in the past year with the development of our Local Care Partnerships, which brings together frontline professionals to put you at the heart of your health and care. This includes GPs, community nurses, and the community sector. This asset based approach in local communities was highlighted as another strength by the Care Quality Commission.

In 2018 we’ve worked closely with colleagues in the Leeds Academic Health Partnership, Employment and Skills and Inclusive Growth teams to promote health and care innovation, the local health economy and develop projects such as the Leeds Health and Care Academy, Activage and Inclusive Anchors projects that help people into employment, support our 100% digital ambitions and promote social inclusion.

In 2019 we will face another tough year. Leeds welcomes the new NHS Long Term Plan and its commitment to prevention, but we will continue to argue for an ending of austerity, settlements for local authorities and decent funding for social care services. Despite this we remain ambitious for all the people of Leeds and will face new challenges such as improving the health of our children and young people and the impact of Brexit together.

I hope you enjoy reading this report, and would invite you to be involved in the future of health and care in Leeds. The Board has four public meetings a year, and I hope you can make it along to one of them to put your comments and questions to the Board or as we develop the Big Leeds Chat I hope you have the opportunity to provide your thoughts and ideas.
Introducing…
The Leeds Health and Wellbeing Board

What is the Leeds Health and Wellbeing Board?
The Health and Wellbeing Board (HWB) is a group of senior representatives from organisations across Leeds, including Leeds City Council, the NHS, the community sector and Healthwatch, which represents views of the public. There is cross-party political representation, with meetings Chaired by the Executive Member for Health, Wellbeing and Adults.

The Health and Wellbeing Board helps to achieve our ambition of Leeds being a healthy and caring city for all ages, where people who are the poorest, improve their health the fastest. The Health and Wellbeing Board works collectively, with the strengths and assets of Leeds people, to oversee, influence and shape action to ensure Leeds is a healthy city with high quality services.

The Board has been meeting since April 2013 and was set up in response to national legislation called the Health and Social Care Act 2012.

Members
There are 20 members of the Health and Wellbeing Board; some are mandatory appointments to adhere to the national requirements for all Health and Wellbeing Boards and some are additional members.

Why does the Health and Wellbeing Board exist?
The Health and Wellbeing Board creates the space for senior leaders to come together to develop strategic oversight and direction for health and care.

In Leeds, the Board takes a place-based approach to tackling the 12 priorities set out in the Leeds Health and Wellbeing Strategy 2016-21 and, through collective leadership around a shared vision, sets the direction for our city to reach its 5 outcomes.

The Board has a relentless focus on reducing health inequalities and creating a high quality and sustainable health and care system.

The Leeds Health and Wellbeing Strategy 2016-21
Our Health and Wellbeing Strategy sets out our vision for Leeds and is our blueprint for how we will achieve that.

So many factors contribute to our health and wellbeing, meaning our challenge is to reflect the breadth of the agenda, whilst being specific about the areas we need to focus on to make the biggest difference. The Health and Wellbeing Board’s work plan has helped guide our collective activity, as well as the work going on in our individual organisations. The updates captured in this report aim to demonstrate progress towards the 12 priorities of the Strategy, supporting our statement of intent that:

In Leeds, as we grow up and as we grow old, the people around us, the places we live in, the work we do, the way we move and the type of support we receive, will all help keep us healthier for longer. We will build resilience, live happier, healthier lives, do the best for one another and provide the best care possible to be the best city for health and wellbeing.
Leeds Health and Wellbeing Strategy 2016-2021

We have a bold ambition: ‘Leeds will be the best city for health and wellbeing’.

And a clear vision: ‘Leeds will be a healthy and caring city for all ages, where people who are the poorest improve their health the fastest’.

Outcomes

1. People will live longer and have healthier lives
2. People will live full, active and independent lives
3. People’s quality of life will be improved by access to quality services
4. People will be actively involved in their health and their care
5. People will live in healthy, safe and sustainable communities

Indicators

- Infant mortality
- Good educational attainment at 16
- People earning a Living Wage
- Incidents of domestic violence
- Incidents of hate crime
- People affording to heat their homes
- Young people in employment, education or training
- Physically active adults
- Children above a healthy weight
- Avoidable years of life lost
- Adults who smoke
- People supported to manage their health condition
- Citizens’ positive view of their wellbeing
- Early death for people with a serious mental illness
- Employment of people with a mental illness
- Unnecessary time patients spend in hospital
- Time older people spend in care homes
- Preventable hospital admissions
- Frequent emergency visits to hospital
- Carers supported
Making a difference
Our individual and collective contribution

About this report
This report serves as a roundup of activity commissioned or directed by the Health and Wellbeing Board and guided by the Leeds Health and Wellbeing Strategy. It covers the time period of January 2018 to January 2019 and is constructed from perspectives of the organisations represented on the Board, actions and updates from those who have brought items to the Board over the last year and an overview of progress around the indicators of the Leeds Health and Wellbeing Strategy.

Progress towards delivering the Leeds Health and Wellbeing Strategy
This Strategy’s outcomes, priorities and indicators gives us a framework to test whether the work we do is making a difference. How we as Board members view our progress is also an important factor in reviewing the way we work together for the people of Leeds. This report also helps capture how other strategies, action plans and projects are helping to achieve specific parts of the citywide vision. It is clear that there is a huge amount going on within organisations and partners working together and working with citizens. Therefore, much of what is provided here is just a snapshot of activity that contributes towards the Leeds Health and Wellbeing Strategy 2016-21.

HWB agenda items aligned to priorities
To ensure that the HWB has a relentless focus the priorities set out in the Leeds Health and Wellbeing Strategy 2016-21, report authors are asked to identify which priorities their items align to. The graph below shows how the 29 public items considered by the Board in 2018 are aligned.

Acronyms explained
LCC – Leeds City Council
CCG – Clinical Commissioning Group
LCH – Leeds Community Healthcare NHS Trust
LTHT – Leeds Teaching Hospitals NHS Trust
LYPFT – Leeds and York Partnership NHS Foundation Trust

Prepared by Leeds Health Partnerships Team
Progress towards delivering the Leeds Health and Wellbeing Strategy

Collated from the organisations represented on the Health and Wellbeing Board
A Child Friendly City and the best start in life

The best start in life provides important foundations for good health and wellbeing throughout life. This means the best start for every Leeds baby from conception to age two, providing high quality, joined-up maternity and antenatal care guided by the mother’s needs for supported families, strong attachments and positive infant wellbeing. It means ensuring solutions are coordinated around needs and assets in families and the wider community.

Highlights from the last 12 months include:

- Children’s social care services in Leeds are rated ‘outstanding’ by Ofsted.
- Leeds Community Healthcare Health Visiting Service were awarded Baby Friendly Initiative Gold accreditation by UNICEF.
- The ‘Baby Buddy’ app is now being promoted as part of routine care to all new parents. Designed to provide stage appropriate knowledge, awareness and confidence the app provides personalised information and is being regularly used by professionals to support their consultations.
- The Food and Activity for Healthy Pregnancy sessions were made available for pregnant women with a BMI over 25 (and their partners). The sessions utilise the HENRY strengths based approach, and look at the basic principles of eating well in pregnancy using the Eat Well guide and the key food safety messages for pregnancy.
- Understanding your Baby: A Course for Parents and Carers’ was developed by the Infant Mental Health Service and aims to increase parents’ confidence in understanding what their baby needs, responding to their needs appropriately and bonding with their baby. The course is now being offered to parents at local children centres.
- A series of local events took place during Leeds Baby Week, including the launch of the ‘50 things to do before you’re 5’ and a Better Conversations conference with professionals.
- Public engagement on the future of the Maternity and Neonatal Outpatient Care Services in Leeds has been undertaken.
- Further investment has enabled the expansion of the specialist community perinatal mental health team. Alongside increasing access to services for new mums this will enable training to be delivered to midwives and other practitioners who support parents in this period.
- Processes have been strengthened to ensure smoking status is accurately assessed and recorded at booking and delivery. Delivery of the Baby Clear smoking cessation programme is underway.
- High satisfaction rates among people using the Leeds Teaching Hospitals maternity service, according to the CQC Maternity Survey 2018. The service has improved across eight key areas since 2017 and now rates as better than most trusts nationally for experiences in antenatal care, labour, and staff communication and support.
- Leeds’ Homebirth Team shortlisted for the British Journal of Midwifery Team of the Year award. Homebirths have increased by 0.5% in 2018 (1.5% to 2%) with 205 homebirths taking place in 2018 promoting choice and best start for baby (more likely to breastfeed, normalising birth, etc).
- Leeds’ pioneering Family Integrated Care approach was rolled out to Leeds General Infirmary (first site nationally at St James’s Hospital) so that all families with babies having
Neonatal care in Leeds are supported to play an active role in their baby’s care whilst on the neonatal unit.

- **Baby’s Bubble** introduced on the neonatal intensive care unit at Leeds Children’s Hospital to protect vulnerable babies from infection by encouraging greater awareness among parents, visitors and staff.
- **Kangaroo Care** introduced in the newborn care unit at Leeds Children’s Hospital to promote skin on skin contact which helps families bond with premature and newborn babies, creating a bond that lasts a lifetime.
- **One of five trusts undertaking medical mediation training and engagement with families to encourage better conversations around babies’ care and reduce or deescalate conflict.**
- **The Family Integrated Care service**, which was introduced at St James’s in 2015, has been rolled out in LGI. Family Integrated Care empowers parents to take control of their baby’s care whilst on a neonatal unit, which is proven to promote better outcomes for both baby and families. Leeds was the first Trust in the country to introduce the service.

**An Age Friendly City where people age well**

We want Leeds to be the best city in the UK to grow old in. Being an Age Friendly City means promoting ageing positively and maximising opportunity for older people to contribute to the life of Leeds. We must build on the strengths of older people and recognise first and foremost their roles as employees, volunteers, investors and consumers. Our built environment, transport, housing must all promote independence and social inclusion.

**Highlights from the last 12 months include:**

- Physiotherapy led group falls prevention classes are resulting in 67% of participants seeing improvements in mobility.
- Water based strength and balance programmes have been deployed across the city.
- Frailty strategy developed for the city using population health management approach.
- Community Contributions research carried out, including in Holbeck and Beeston which has resulted in a new Asset-Based Community Development worker being recruited for that ward. The findings also being used by third sector providers and volunteer managers to bring funding into the city.
- The Activage Horizon 2020 Project has delivered smart devices and digital inclusion training to over 40 citizens of Leeds aged 65 and over. The solution supports participants in the ability to self-manage their medical conditions and maintain a healthy lifestyle through the use of wearable technology. The home sensor element of the project can offer peace of mind to carers at a distance from their loved ones.
- ‘Street by Street’ project launched in December, aimed at encouraging community contributions to support older people in three neighbourhoods in Leeds.
- The Door to Door Community Transport project secured £339K in funding to address unmet demand, reduce social isolation and improve access to health services.
- Centre for Ageing Better commissioned research into the Information and Advice needs of older people on their housing options – findings to be published in February 2019.
- Ongoing implementation of Age Friendly Working Practices, focusing initially one health and wellbeing in work within anchor institutions.
Referrals into the STEP programme have been increasing since the launch a year ago.
To date 29 organisations have signed up to the Age Friendly Leeds Charter.
150 organisations and businesses have signed up to the ‘Come in and Rest’ campaign.
Fifteen organisations were awarded community grants to run events related to International Day of Older People in Leeds, supporting communities to celebrate the diversity of the city and the contributions made by older people living in Leeds.
The SWIFt Service has supported 130 people living with frailty to develop action plans focussed on improving independence and wellbeing, with noted improvements to wellbeing and social isolation outcomes.
Leeds has been selected to take part in the LGA Design in Social Care programme, which will aim to better understand how we can support people living with mild frailty to live healthy and independent lives.
Engagement with communities on creating a dedicated older people’s mental health service, due to launch in March 2019.
Malnutrition helpline launched to support older people and their carers.

SPOTLIGHT ON: Activage Leeds

Activage aims to prolong and support the independent living of older adults in their living environments. Its main objective is to respond to the real needs of caregivers, service providers and public authorities. They are trailing innovative and user-led services across seven European countries based on Internet of Things (IoT) technology.

The Leeds pilot project involved trialling IoT services around daily activity monitoring, emergency triggers and prevention of social isolation. It aims to create the first European inter-operable and open ecosystem, reusing existing IoT platforms, technologies and standards that will enable us to develop active and healthy ageing IoT services and solutions at large scale.

It is a smart solution aims to prolong and support the independent living of older adults in their living environments. Its main objective is to respond to the real needs of caregivers, service providers and public authorities. The Leeds project will involve a total of 1000 users, with a mix of primary carers, GPs, older people and their family members.

Using latest Samsung wearable technologies and mobile phones, combined with energy monitors, the project helps users to improve their quality of care and self-manage their health needs, by understanding how well they are using their energy. The project targets people aged over-65 with mild levels of frailty.
Strong, engaged and well-connected communities

The relationships and resources in communities are building blocks for good health. Leeds has brilliant and diverse communities, well-established Neighbourhood Networks and a thriving third sector. There are vulnerable groups and areas of the city which experience health inequalities, including people in poverty, migrants, refugees and asylum seekers, the homeless and people with disabilities. People’s health outcomes can also depend on specific characteristics, such as ethnicity, gender and sexuality, amongst others. Carers are also crucial to our communities.

Highlights from the last 12 months include:

- People’s Voices Group (PVG), convened by the Leeds Health and Wellbeing Board, and chaired by Healthwatch, continues to bring together partners join-up consultation and engagement, and reduce repetition.
- The Big Leeds Chat event was the first ‘one system’ city-wide engagement event in Leeds. It brought around 500 local people together with key decision makers and leaders, to have a conversation about what matters to them and to better understand their needs and preferences.
- A series of other consultation and engagement activity delivered throughout the year, including on: maternity services, Urgent Treatment Centres, mental health services, local care partnerships, community respite care services and weight management services.
- The CCG Third Sector Grants final round has funded a diverse range of health projects aimed at improving health outcomes and build capacity in order to relieve pressure or demand elsewhere in the health system. A total of £2.3m funding was distributed through the Grant between 2015 and 2018.
- £325,000 allocated to Leeds through the West Yorkshire and Harrogate Harnessing the Power of Communities Fund.
- Patient participation groups established in local GP practices, to support the development and delivery of new healthy lifestyle projects within practices.
- The Homeshare scheme continues to match someone younger looking for an affordable place to live with someone older who has a spare room and who would benefit from help or companionship at home.
- Launch of the Carers Connections project supporting older carers who are socially isolated or lonely.
- Grants for Carers Group established, to help establish or maintain peer support groups that provide opportunities for mutual support for carers.
- Leadership teams are in place for the Local Care Partnerships, aimed at developing new ways of working in local communities, built around the needs of local populations.
- Launch of Big Change Leeds, an alternative giving scheme aiming to address the needs of homeless people.
- Expansion of mental health drop-in sessions to cover four areas in Leeds in 2018. These sessions are held at community hubs, bringing people closer to social activities taking place in their area and helping them to make other connections within their communities.
Housing and the environment enable all people of Leeds to be healthy

To be a healthy city, our environment must promote positive wellbeing. This means Leeds houses are affordable, warm, secure, and support independent living. Green space, leisure provision and walking and cycling opportunities promote health and happiness. Areas of Leeds with the lowest overall green space provision are predominantly inner city, high density housing areas. Considerations about future growth must consider health inequalities and ensure adequate provision.

Highlights from the last 12 months include:

- Extra investment to drive continuous improvements in Council housing quality. Current investment programmes include insulation and heating works to improve the energy efficiency of homes.
- In 2017/18 inspection visits of nearly 2,500 private sector rented housing, with over 1,500 hazards being removed or reduced and over 3,500 people benefitting from these interventions.
- Leeds has adopted a number of proactive initiatives to improve housing conditions in the private rented sector, including: Leeds Neighbourhood Approach, Leeds Rental Standard, Private Rented Sector Forum / Conference.
- Improved services within sheltered support schemes, including increased staff presence, increased focus on providing a range of wellbeing activities in schemes and rebranding of the service as retirement living.
- A major procurement is underway to develop 240 extra care units on Council owned sites via experienced extra care providers, planned for delivery in 2021. In addition, the Council is investing £30m in the development of a further 180 extra care units.
- £5.5m budget in 2018/19 for disabled Council tenants requiring housing adaptations.
- A new process has been established to enable public organisations to refer people at risk of homelessness to the Leeds Housing Options Service.

SPOTLIGHT ON: Carers Connections

Carers Connections supports carers aged 50 and over who are socially isolated to make connections with other people, services and communities. Evidence shows that up to 80% of carers can experience social isolation or loneliness, and isolation is particularly complex and entrenched for older carers.

The Carers Connections worker offers one-to-one support, and links up with groups and other projects to encourage carers to build more social engagement into their lives. Supported by Carer Support Workers, they ensure that the right care is in place to enable carers to look after their own social needs.

Carers Connections also offers support delivered by trained volunteers who provide social contact in the carer’s home, meet up with carers and accompany carers to groups or events, when the carer does not feel confident to do this alone.
Leeds has been allocated additional funding for 2018/19 to help reduce rough sleeping. The funding will be used to fund a specialist mental health social worker and mental health nurse, and an additional addiction support worker, who will all be part of the wider Street Support Service led by Safer Leeds.

- Partnership implementation of the Leeds ‘Responding to Hate’ Strategy.
- Continued implementation of the Leeds Affordable Warmth Strategy.
- Launch of the £35m Leeds PIPES project, delivering a new heat and hot water system to 2000 properties, making heating and hot water more affordable.
- First themed collaboration workshop held where there was a cross-sector conversation, including from the health and care sector, on improving housing quality.
- LYPFT started a large scale estates programme in 2018 to dispose of poor quality estate and rehouse services into improved or refurbished estate.
- Launch of new Home Plus Leeds service, helping people live safely and independently in their own homes by addressing health risks in the home, such as risks of falling; energy efficiency and affordability; warmth and condensation / damp and repairs.

**SPOTLIGHT ON: Home Plus Leeds**

Home Plus is aimed at enabling and maintaining independent living through improving health at home, helping to prevent falls and cold related health conditions. It is for people who may be at risk of falling; who are struggling to heat their home or pay heating bills; who need help with repairs that are causing a hazard in their home; or who need information and advice to maintain independence.

The service provides:

- Comprehensive home assessment to identify client needs
- Rails and equipment to reduce the risk of and prevent falls
- Servicing and repairs to heating and hot water systems
- Help changing to the cheapest energy deal
- Free energy saving equipment and advice
- Draught proofing and insulation measures
- Assistance with repairs that are causing a hazard (home owners)
- Identifying, assessing and reporting housing repairs (tenants)
- Advice and support on issues such as a change in housing or financial circumstances, bereavement

A strong economy with quality local jobs

A good job is really important for good health and wellbeing of working age people. Reducing social inequalities means creating more jobs and better jobs, tackling debt and addressing health related worklessness. With collaboration across private, public, academic and community organisations, Leeds is perfectly placed to be a great location for health innovation. We must also recognise that health and care organisations employ a huge number of people in the city.

Highlights from the last 12 months include:

- The Leeds economy continues to perform well, with a sustained level of jobs growth and unemployment falling faster than the national average.
- The city continues to have amongst the highest rates of business start-ups and scale-ups in the UK, and there are an extra 8,000 businesses than in 2009.
- Visitor numbers are up and the city has climbed the rankings to become the fourth most popular conferencing city in the UK. West Yorkshire was also listed on the National Geographic’s Cool List for 2019.
- The Council has committed to becoming a Living Wage employer.
- Launch of the Leeds Inclusive Growth Strategy which further underlines how improving health and wellbeing contributes to a stronger economy.
- Developing the Innovation District project and inclusion on the Regional Entrepreneurship Acceleration Program, run by the Massachusetts Institute of Technology in Boston, which helps regions accelerate economic growth and promote social progress through innovation.
- A growing city centre with high profile firms moving into the city creating new jobs and training opportunities, including Channel 4.
- Working with the LTHT and others to develop an Inclusive Anchors Network.
- LYPFT’s investment in its staff health and wellbeing programme in 2018 which included roadshows, health checks and the launch of a financial wellbeing package.
- Leeds Teaching Hospitals is recognised as the highest ranking NHS employer of apprentices in 2017/18. Apprentices accounted for 18.5% of all new starters at the Trust; i.e. 600 apprentices and we are on track to recruit around 700 in 2018/19.
- LTHT has employed more than 2000 apprentices since 2010, and over a 1000 of those individuals still work at the Trust. Our retention rates are nearly three times higher than the UK apprentice average
- LTHT has worked with the long term unemployed in partnership with the DWP & Job Centre Plus since 2011- supporting individuals into work by offering placements and bespoke pre- employment activity in partnership with Leeds City College. These programmes see the Trust offer placements and guidance to individuals who have been identified as at risk to finding barriers to employment - some of the city’s most vulnerable individuals- including young care leavers, young carers, refugees and individuals with mental health and / or learning disabilities.
- This year (2018/19) we have had 64 participants registering on one of these programmes, significantly improving their socio-economic status, which impacts their health & wellbeing and therefore supporting the city’s inclusive growth strategy.
SPOTLIGHT ON: Leeds Inclusive Growth Strategy

The Leeds Inclusive Growth Strategy sets out how Leeds City Council, the private sector, universities, colleges and schools, the third sector and social enterprises in the city will work together to grow the Leeds economy ensuring that everyone in the city contributes to, and benefits from, growth to their full potential. It sets out how the city intends to promote a positive, outward looking image on the global stage seeking to increase inward investment, exports and tourism.

It sets out 12 “big ideas” that act as an action plan to encourage inclusive growth in the city, these are focused on supporting people, places and productivity. The strategy supports the delivery of the Leeds Health and Wellbeing Strategy, with one its big ideas been to make the best city for health and wellbeing. This will be achieved by:

- Working in partnership to improve the health of the poorest the fastest
- Building on our strength as a leader of health innovation by further developing our workforce and attracting new skilled jobs in growing sectors such as digital and medtech
- Supporting healthy, active lifestyles to enable people of all ages to fully realise their social, educational and economic potential
- Working with schools, colleges and universities to open up opportunities for our residents to develop their skills and promote social mobility
- Enabling more people to manage their health in the community and workplace, working with people to promote prevention and self-management

Get more people, more physically active, more often

We want Leeds to be the most active big city in England. If everybody at every age gets more physically active, more often, we will see a major improvement in health and happiness. We can reduce obesity, improve our wellbeing, become more socially connected and recover better from health problems. One in five adults in Leeds is inactive. As a general rule, the more we move, the greater the benefit. The biggest benefit will be for those who are currently inactive.

Highlights from the last 12 months include:

- Working with First Contact practitioners and physiotherapists to encourage access to local suitable physical activity options.
- Considering how best to embed signposting to physical activity within services such as diabetes and respiratory services.
- The CCG have invested in further capacity in pulmonary rehabilitation, aimed at encouraging people to walk more and be more active.
Public Health England Physical Activity Clinical Training programme commenced from May in Leeds, and focussed on nurses and health care assistants from primary and secondary care.

Improvements made to Musculoskeletal and Physical Activity Pathway, with greater focus on lifestyle interventions, to aid recovery and minimise risk of recurrence.

The Public Health England Active 10 campaign was promoted across the city with communities and health and social care workforce. The campaign has resulted in an increase in the numbers of 40 to 65 year olds active.

A city-wide conversation on a physical activity ambition for the city commenced in 2018. This involves engaging local residents, community groups, the workforce, decision makers, and local businesses.

A wide range of third sector partnership/community programmes from gardening to wellness groups helping increase physical activity levels.

One You Leeds has had 238 people taking part in the Move More programme.

SPORTLIGHT ON: One You Leeds

One You Leeds is a free local healthy living service designed to support Leeds residents to start and maintain a healthy lifestyle. It provides services that help people to be smokefree, eat well, cook well, move more and manage their weight.

Highlights during 2018 include:

- More than 1550 people signed up for the weight management course.
- More than 2280 people committing to our Smoke Free programme in order to quit smoking for good.
- More than 493 people took part in our Eat Well courses
- More than 238 people took part of our Move More programme this year.

Feedback from users of the service have included:

“This course has given me the knowledge to turn my lifestyle around” – Cheryl

“I have benefited from One You Leeds Health wise and financially. I could not have done this without the support from my excellent coach” – Edna
Maximise the benefits of information and technology

New technology can give people more control of their health and care and enable more coordinated working between organisations. Joined-up information enables people to tell their story once and choose the channel they use to communicate. We want to make better use of technological innovations in patient care, particularly for long term conditions management. This will support people to more effectively manage their own conditions in ways which suit them.

Highlights from the last 12 months include:

- The Assisted Living Leeds Innovation Lab continued to offer co-design sessions between developers and citizen and patient groups. This included a session with stroke survivors testing a new innovative rehab assistant; and a session to design a new app for people at risk of osteoporosis.
- Continued roll out of the electronic Leeds Care Record.
- Scan4Safety roll out continues across LTHT enabling the delivery of better patient care, improved clinical productivity and supply chain efficiency.
- Teledermatology project launched as part of the Leeds Cancer Programme – all Leeds GPs now have equipment to send electronic images of suspected skin cancer lesions.
- All GP practices have free patient WiFi.
- Leeds has been awarded funding for a digital inclusion project, aimed at people with dementia and their carers and connecting them to the benefits of digital health tech.
- The Data Matrix used to inform licencing decisions is a finalist in the 2019 LGC Awards. It has been nominated in the two categories of Public Health and Digital Impact.
- All services at LTHT available via the national e-referral system. In August 2018, 73% of all GP referrals were made through the system (up from 29% in October 2016).
- Telephone follow up clinics introduced to avoid patients coming back into hospital and freeing up to 29 appointment slots a week.
- LCC and the NHS have worked with mHabitat to develop a citizen blueprint for development of digital technologies to support prevention, proactive care and self-management in Leeds.
- The Leeds Centre for Personalised Medicine and Health has launched a groundbreaking clinical trial in Leeds, to identify people's risk of diseases such as diabetes, and help prevent them.
- LYPFT started a project to develop and implement a new electronic patient record system in 2018.
- LTHT Histopathology Department is the first UK hospital to have achieved 100% digitisation of histopathology slides, processing over 1,000 pathology slides a day. The collaboration between LTHT and Leica Biosystems is paving the way for a revolution in cancer diagnosis.
- In July 2018 LYPFT announced a partnership with Care Works, a specialist provider of health and social care software solutions, to replace its current electronic patient record (EPR) system with the new Care Director software. LYPFT will be the first mental health provider in England to use it. The Trust has signed up to an exciting 10 year deal that will bring significant improvements to record keeping, workflows and the quality of care. Go live is planned for December 2019.
A stronger focus on prevention

Targeting specific areas can make a really big difference to preventing ill health, such as obesity, smoking, and harmful drinking. Cancer prevention, early diagnosis and successful therapy will reduce inequalities and save money. Focusing on these issues requires a whole-city approach to help people remain healthy and independent for longer. Local and regional partnerships protect the health of Leeds’ communities around infection prevention and control, and environmental hazards such as air quality and excess seasonal deaths.

Highlights from the last 12 months include:

- The revised screening process for alcohol and tobacco in hospital was launched. Patient’s now entering hospital will receive advice and support at an earlier stage.
- Smoking prevalence across the city is now at an all-time low of 16.7%. Progress continues to be made towards the aim of creating a smokefree generation, with over 35,000 less smokers in Leeds than there were in 2011.

SPOTLIGHT ON: Digital pathology

LTHT Histopathology Department is the first UK hospital to have achieved 100% digitisation of histopathology slides, processing over 1,000 pathology slides a day. The collaboration between LTHT and Leica Biosystems is paving the way for a revolution in cancer diagnosis.

The step-by-step process each slide goes through at Leeds has been rigorously tested and received ISO15189 (International Organisation for Standardisation) accreditation laying the foundations for national guidelines on using digital pathology.

Leeds research team has been awarded a £10.1m investment from UK Research and Innovation to expand a digital pathology and artificial intelligence programme across the North of England. The successful partnership bid was led by the University of Leeds and Leeds Teaching Hospitals as part of a network of nine NHS hospitals, seven universities and ten industry-leading medical technology companies, called the Northern Pathology Imaging Co-operative. It means Leeds at the heart of an NHS-academic-industry consortium set to become a globally-leading partnership for applying artificial intelligence (AI) research to cancer diagnosis.

The Breast cancer AI initiative will use AI to detect signs of breast cancer from scans, will help hospitals contending with a shortage of radiologists. The first phase large-scale analysis on historic data to ensure the algorithm is performing optimally will later test it on live patients.
• This year’s Stoptober campaign resulted in 1,206 referrals to the One You Leeds (OYL) smoking cessation service and 70 sign ups at outreach events in deprived areas.

• A smoking referral pathway was agreed with OYL. All patients who agree to be referred for support are shared with OYL on a weekly basis.

• The West Yorkshire Tackling Illicit Tobacco Programme continues to make good progress in reducing the supply and demand for illicit tobacco with rates across the region falling by 1% compared to a 5% increase nationally.

• Over 5,000 people have accessed social prescribing services, which are enabling people to access personalised services that support them to meet their personal goals in their own neighbourhoods. Work to oversee the re-procurement of a city-wide model is taking place, with mobilisation due to commence in March 2019.

• OYL has actively developed partnerships with local healthy living providers and other support services. Achievements include co-location opportunities, development of joint engagement events and refining referral and signposting pathways.

• GPs have been upskilled on the latest evidence on e-cigarettes including highlighting key recommendations and advice on their use so they can advise patients more consistently and confidently across Leeds.

• Working in partnership with the British Heart Foundation to test a community based approach to identify raised blood pressure in addition to increasing accessibility to blood pressure testing and lifestyle support. The project is targeting Council front-line employees as well as through six community pharmacies in the 10% most deprived areas of the city. There have been approximately 1,000 blood pressure tests undertaken.

• Re-procurement of the local NHS Health Check programme, which will be delivered by the GP Confederation, providing further opportunities to embed this important service within General Practice, localities and out-of-hour hubs. It will also make the service more accessible to people who traditionally are less likely to access the service.

• Campaigns delivered to encourage people to take up cancer screening such as cervical smears and bowel cancer tests.

• Launch of lung cancer screening project in south Leeds. Project was developed in partnership with LTHT, LCC, University of Leeds and Yorkshire Cancer Research. See case study for more information.

• Infection prevention and control initiatives include flu vaccine and ‘I Spy E-coli’.

• Continued promotion of our nationally-recognised ‘Seriously’ campaign to raise awareness of the risks of overuse of antibiotics.

• A renewed commitment to supporting both staff and service users to cut down or quit smoking to lead to better health outcomes. More LYPFT staff are being trained to become stop smoking practitioners in 2018/19.

• During Alcohol Awareness Week, Forward Leeds held events at Leeds Beckett University, Leeds General Infirmary, Leeds University Student Union, Boots the Chemist, Leeds City College, Kirkgate Market and Leeds Railway Station, where they asked people to pledge a positive change to their drinking. Across the events, Forward Leeds spoke to 204 people, undertook 131 opportunistic brief interventions and referred three people into treatment. 50 people also made online pledges.

• The No Regrets campaign (a responsible drinking campaign, aimed at 18-25 year olds) and website was also launched at the beginning of Alcohol Awareness Week. By the end of January 2019, almost two thousand individuals had accessed the site, with some blogs on the site having been viewed hundreds of times.

• The Alcohol Licensing Data Matrix is now being used in the alcohol licensing process. So far it has helped inform two applications that were rejected, and one which was approved but with conditions. The tool is currently a finalist in two categories (Public Health and Digital Impact) of the LGC Awards 2019.

• Free alcohol (and drug) awareness training, provided by Forward Leeds, was delivered to a total of 57 individuals representing a wide range of bars, pubs and clubs, as well as
key partners including the West Yorkshire Police licensing team, and security firms from key shopping arcades in the city.

- Public Health have been working with primary and secondary care, as well as Forward Leeds, on a Community Hepatology Programme, which identifies individuals with alcohol-related liver disease (ArLD) and provides treatment for those who need it, in three GP practices in Leeds.
- Public health’s alcohol work was included in the Purple Flag submission, helping the city retain its Purple Flag status.
- In terms of alcohol treatment, Leeds is now the best performing core city with regards to alcohol outcomes.

**SPOTLIGHT ON: NHS Health Checks**

The NHS Health Check is a free health check-up for adults in England aged 40-74. It’s designed to spot early signs of stroke, kidney disease, heart disease, type 2 diabetes or dementia.

As a result promotion aimed at encouraging uptake, between April 2017 and March 2018, 28,150 were invited to attend their NHS Health Check, 20,412 of those took up the offer.

As a result, 1,379 people were diagnosed with Cardiovascular Disease (CVD) and are now being managed via the appropriate pathway, 416 people have been found to be at high risk of cardiovascular disease and a further 1231 at high risk of developing diabetes, all of whom will now be reviewed on an annual basis and supported to make lifestyle changes to help reduce their risk.
Support self-care, with more people managing their own conditions

Long term conditions are the leading causes of death and disability in Leeds and account for most of our health and care spending. Cases of cancer, diabetes, respiratory disease, dementia and cardiovascular disease will increase as the population of Leeds grows and ages. This means it is important to support people to maintain independence and wellbeing within local communities for as long as possible. People need to be more involved in decision making, with person-centred care, coordinated around individuals.

Highlights from the last 12 months include:

- Diabetes strategy, activity has included advising people on foot care to reduce amputation risk, and improving access and take up of structured education programmes.
- Completion of the Diabetes Structured Education (Type 2) course has continued to be above target (77% accumulative total against a target of 60%). People are reporting an improved confidence in self-managing their condition, sustained at 100%.
- 10,149 referrals into the National Diabetes Prevention Programme. Increased referrals is a result of incentivised mail out approaches that are in place and are currently being carried out by 73 GP practices.
- Use of the Collaborative Care and Support Planning has continued within the city. Embedding the approach of Better Conversations, all GP practices are now engaged in this process, incentivised through the CCG Quality Improvement scheme. The volume of people having a Collaborative Care Support Plan (CSSP) has continued to increase to support them in managing their own condition. There is a target of 65,000 people to have a CSSP, which enable a person to focus on "what is important to them" and allowing for the development of person centred goals to be agreed.
- Ten integrated Breathe Easy groups are now established, with a particular focus on disadvantaged groups and areas with high prevalence of COPD.
- NHSE have funded and are working with Leeds to offer an evidence based digital solution, MyCOPD, to support people living with COPD to have the confidence, skill and knowledge to manage their condition. The funds are to support 20% of the COPD population (severe COPD), which equates to 3382 patients. The app will be offered through Pulmonary Rehabilitation within LCH and in LTHT respiratory clinics.
- Implementation of wave one of the First Contact Practitioner action plans, aimed at improving access to musculoskeletal expertise. In the LS8 and LS9 locality, there are 13 practices involved with a combined practice population of c86,000. In LS25 and LS26 locality, there are now 9 practices involved with a combined population of c67,000.
- Shared decision-making within musculoskeletal services is improving communication, access to self-management resources and promoting a greater understanding of a patient's condition and ability to self-manage. A workshop was held with LTHT colleagues to progress the process of shared decision-making across other specialities.
- DigiBete is providing support for parents of children with Type 1 Diabetes. It has been designed and created by parents in partnership with Leeds Children's Hospital. DigiBete is a digital platform that provides additional support to parents and means that schools, extended family and the child’s community can also access training to keep children safe and ensure that their condition is better understood and managed effectively.
- Work continues on the person held records (Helm™) project giving people a chance to access personal information on health as well as council services.
**SPOTLIGHT ON: Helm™**

Helm™ is an online person held record (PHR) for health and care, enabling people to have access and contribute to their own health and wellbeing information on their own device e.g. mobile, tablet.

It was developed following citizen feedback to:

- Provide people with access to a system that joins up all their medical information from the NHS with council services and more, with one single login
- Provide people with greater control over their own health and wellbeing
- Help monitor interactions with service providers
- Encourage people to act on their concerns sooner

It is entirely owned and developed by Leeds. Helm™ will provide a wider, coordinated localised solution for people in Leeds and not be tied to any particular clinical system. It is an innovative platform allowing people to view, control and contribute to their own health and wellbeing information.

It currently includes information from GP records, but will over time, develop to include information from other sources – hospitals, the City Council, mental health and community services and the voluntary sector.

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**SPOTLIGHT ON: Leeds Lung Health Check Project**

In November 2018, a mobile lung cancer screen project in south Leeds was launched. The project has been developed in partnership with LTHT, the University of Leeds, LCC and Yorkshire Cancer Research.

The new screening trial is designed to help detect the early signs of lung cancer and save more lives. 7,000 smokers and ex-smokers are being invited to take part in the project, and it is estimated that 300 lung cancers will be detected during the four-year programme, allowing those patients to receive potentially life-saving treatment earlier.

It involves a special type of x-ray called a screening CT scan that can detect very early signs of lung cancer. The scans are carried out in a mobile unit based in supermarket car parks and shopping centres.

Evidence from the US shows that 8 in 10 patients diagnosed with lung cancer by screening will be alive 10 years after diagnosis, compared to just 1 in 10 for people diagnosed currently in the UK.

As well as saving lives, the trial will help provide vital evidence that may help the government decide how to introduce a national lung cancer screening programme in the UK.
Promote mental health and physical health equally

Our ambitions for mental health are crucial for reducing health inequalities. Good employment, opportunities to learn, decent housing, financial inclusion and debt are all key determinants of emotional wellbeing and good mental health. Improving mental health is everyone’s business. We want to see this led by employers, service providers and communities alongside improved integration of mental and physical health services.

Highlights from the last 12 months include:

- A review has started into the ways the mental health needs of people with long-term conditions can be better supported, and to encourage primary care to consider the physical health of people with mental illness and learning disability. The new Improving Access to Psychological Therapies procurement will have a specific emphasis on people with long-term conditions as well as expanding capacity to help treat common mental health problems.
- One You Leeds has completed its first year as an integrated healthy living service with more than 60% of referrals being for people living in the more deprived areas of Leeds. All outreach and service delivery is targeted in these areas to ensure services are more accessible to those most in need of support.
- The Council has adopted a Healthy Weight Declaration which will launch in 2019.
- Continued promotion for the MindMate resources and implementing Future in Mind.
- Funding services (e.g. Teen Connect) to support children and young people in distress.
- MindWell website has recorded 100,000 visitors to the site since it launched.
- Local work on Stop Overprescribing of Medicines for People with a learning disability.
- Number of partnership activities, including with the British Transport Police and local universities/colleges, to mark events such as World Mental Health Day.
- Introduction of the New Care Model for children and adolescent mental health services provide care closer to home and reducing number and length of hospital bed days.
- NHS England capital investment confirmed for a new Tier 4 children and adolescent mental health service unit, to be built in Armley.
- Ongoing mental health and learning disabilities anti stigma work, including events and campaigns surrounding NHS 70.
- Contributions to Yorkshire Evening Post ‘Speak Your Mind’ campaign, including a recent piece on looking after your mental health at Christmas and promotion of mental health drop-in sessions for the public across Leeds.
- A project to increase the number of people with learning disabilities to have annual health checks and take part in national health screening was commended at the Nursing Times Awards.
- Establishment of Children and Young People’s mental health crisis team
- Launch of access to online counselling for children and young people
SPOTLIGHT ON: Get Checked Out

LYPFT’s Health Facilitation Team worked with local and national health professionals and screening partners to develop easy-read ‘Get Checked Out’ information, which supports and encourages people with a learning disability to have health checks and screening.

The project was motivated by a drop in the uptake of breast cancer screening in Leeds, and that people with learning disabilities die earlier than the national average, with many of those deaths been avoidable. This was against a backdrop locally of increasing uptake of the learning disability annual health, which created an opportunity to encourage more people to take part in screening programmes.

The ‘Get Checked Out’ guide was updated to provide more accessible information about screening for a person with a learning disability. Although the project is not yet complete, it has already seen positive results.

It has seen the development of a complementary website www.getcheckedoutleeds.nhs.uk, which gives service users access to government-driven health screening initiatives that they might otherwise not know about. There are new links with professionals who are responsible for screening and can advise on service planning to make sure people with a learning disability aren’t overlooked.

Other spin-off benefits include:

- Teaching more than 200 healthcare professionals & students how to work with people with a learning disability. Feedback suggests participants feel confident to change their practice to make reasonable adjustments.
- Running a joint awareness raising programme with NHS England for admin, voluntary sector, private sector and professionals around health inequalities.
- Being asked to help NHS England to create accessible documents to support a regional flu campaign. This should also support people for whom English is not their first language, or other vulnerable members of society as well as those who have a learning disability.
- Developing an awareness-raising training package which is supported by all screening partners and the health facilitation team.
A valued, well-trained and supported workforce

Leeds is one of the best places in the UK to work in health and social care. We have a highly motivated, creative and caring workforce, working hard to deliver high quality care. This workforce, many of whom live as well as work in the city, are a huge asset for making change happen. Working as one workforce for Leeds, with shared values and collaborative working, supports joined-up services. The third sector and those in caring and volunteer roles in the community will be crucial to make the most of our city wide assets.

Highlights from the last 12 months include:

- System-wide leadership community established which brings together over 200 key influencers to date, with links being established to existing leadership development work.
- The Leeds Health and Care Academy supports the creation of one Leeds workforce. The Academy is due to launch April 2019 with its initial range of products.
- Merrion House has been established as a One Workforce workplace enabling staff to work side-by-side to strengthen partnerships across the system.
- Over 1000 apprenticeships now offered across the whole system, and the number is expected to increase. The graduate nurse apprenticeships scheme was successfully launched.
- Better Conversations culture change programme has been commenced and developed further to roll out to 5000 staff over next two years. The programme focuses on working with people.
- Leeds Community Health NHS Trust named as one of the top 50 inclusive employers in 2018/19
- Launch of the Big Thank You campaign asking people internally and externally to say thanks to anyone who helps them out over winter and beyond, including workforce.
- The Organisational Development Hub meets weekly, bringing together HR and OD leads across the system to jointly work on health and care priorities for the city.
- Winter Friends scheme is offering training to frontline staff and community volunteers to help vulnerable people over winter
- West Yorkshire funding approved Leeds’ bid for four Occupational Therapy staff from across the Leeds Workforce to work directly in GP practices. This pilot has scope to scale up and transfer learning to other projects.
- Flu vaccinations offered to all frontline staff.
- Staff recognition events among all partners including those linked directly to NHS 70.
- Launch of Workforce Strategic Plan including programmes of staff development across all levels.
The best care, in the right place, at the right time

More effective, efficient health and care means moving more services from hospitals to community settings, with services closer to home will be provided by integrated teams. This kind of integration, designed with people at the heart, helps to keep people out of hospital whilst providing care in the most appropriate setting. These teams will be rooted in neighbourhoods and communities, with coordination between primary, community, mental health and social care.

Highlights from the last 12 months include:

- First Urgent Treatment Centre designated at St George’s Centre, aimed at reducing patients accessing A&E.
- There are currently Local Care Partnership leadership teams forming to develop new ways of working locally, based on the needs of their local populations.
- Full implementation of e-triage – all routine referrals are now reviewed by a consultant before appointments are booked – meaning patients are far more likely to receive the most appropriate advice and treatment.
- Increased use of formal Advice and Guidance Service, (481 in July 2018 compared to 137 in January 2017) meaning patients are more likely to be treated in the most appropriate setting. One outcome of this is reduced waiting times - for example In Atrial Fibrillation clinic waiting time reduced from 2-3 months to 2 weeks.
- Fast-track Lower Urinary Tract Symptoms Clinic for patients and the no queuing on arrival initiative at Ophthalmology Clinics means a decrease in waiting times for patients and better patient satisfaction.
- Home First approach adopted by Leeds as part of review into flow and discharge of patients in the health and care system
- The High Intensity Users Project focused on reducing A&E attendances through working with those people who use the service the most. The project has saved over 750 Emergency Department attendances in 17/18, over 450 ambulance conveyances and over 250 admissions.
- Third sector partners running initiatives such as Hospital to Home and Home Plus (Leeds) to support patients on discharge to reduce risk of readmission.
- Extended access to primary care offering evening and weekend appointments.
- Helping new communities in Leeds to understand how to access healthcare in the city including working with the Migrant Access Partnership.
- Following the development of the outcomes framework for frailty early this year, the Provider Partnership Board established a Clinical Strategy Group for Frailty to identify and develop integrated care solution to achieve improved outcomes for people living with frailty and at the end of life.
- Leeds have been selected as one of four national exemplar sites for Population Health Management in recognition of the progress made so far. There will be a twenty week development programme from January 2019 to test new models of care that will deliver the outcomes in four test-bed localities – with a focus on people living with frailty.
- Local awareness campaigns based on the national Help Us, Help You approach.
- Leeds Community Healthcare NHS Trust awarded overall “Good” status, with “outstanding” for caring in adult services.
SPOTLIGHT ON: Urgent Treatment Centres

The mandate for establishing Urgent Treatment Centres (UTC) across the country comes from NHS England as part of their drive to improve urgent and emergency care. In Leeds, we have already established our first UTC in Middleton, at the St George’s Centre.

Urgent care is care that someone feels is needed on the same day but their illness or injury is not life-threatening. This could include anything from cuts, minor injuries, bites or stings through to mild fevers, vomiting and diarrhoea etc.

UTCs help simplify the system for you when you have an urgent care need. Through 2019, the CCG will continue working on expending the UTC offer in the city. Over the past few years they have been working with partner organisations, frontline workforce (including clinicians) and patients to determine the future local requirements of UTCs, that will best meet the needs of our local residents, and visitors.

As a result, they have are proposing five UTCs for the city (including the existing St George’s UTC), and during the start of 2019 will be engaging local people on the proposals.
Roundup of Health and Wellbeing Board activity

Recommendations and progress updates from the last 12 months
January 2018
Workshop session

1. HWB as an ‘anchor of place’

**Actions for consideration:**
- HWB to receive the HWB Annual Review report 2017-18 for agreement at 19 February 2018 meeting.
- Mental health as a continued priority for 2018.
- Opportunity to have a greater focus on place and populations.

**Update:** The HWB first annual report was agreed at 19 Feb 2018 and was published online. Mental health and place continued to be a priority for HWB in 2018 reflected in a number of pieces of work that came to the Board recognising the impact of wider determinants on health. This can be seen through mental health being an overarching focus for our workshops and items, endorsement of the Mental Health Prevention Concordat at the end of 2018.

February 2018
Public meeting

2. Joint Strategic Needs Assessment (Simon Foy and Tony Cooke)

**Recommendations:**
- Endorse the change from a Joint Strategic Needs Assessment to a Joint Strategic Assessment (JSA), reflecting the ‘working with’ approach and reflecting strengths and assets based approach developed in communities and neighbourhoods.
- Endorse the extension of the JSA to cover the wider determinants of health in line with the refreshed Health and Wellbeing Strategy/Leeds Plan, Best Council/Best City priorities.
- Establishment of a partnership task and finish group to drive the JSA.
- Agreement that the JSA includes focus on secure and happy childhoods to ensure the best start for children and young people.
- Agreement that a wide breadth of information is used to inform the JSA including existing data sets where appropriate (e.g. mental health needs assessment framework).

**Update:** The JSA process has been led by a citywide partnership steering group, with strong ownership, input and commitment from all relevant partners. The analysis has combined quantitative and qualitative evidence to provide a rich intelligence at community and city-wide level. It also outlines inequalities and best practice in tackling these. It provides a valuable opportunity to understand and assess progress at the mid-point of the Leeds Health and Wellbeing Strategy and to use the analysis to set a clear future direction of travel that reflects our values as a city, prioritising our ambition to an inclusive and ambitious and the Best Core City for Health and Wellbeing.

Learning from good practice and innovation from elsewhere, the Leeds JSA takes a ‘Future Generations’ approach, helping us to understand current population trends and allowing us to consider the choices we have in response. We are increasingly articulating what we want it to be like to live in Leeds in 10/20 years’ time and future developments like the NHS Long Term Plan, Innovation district, HS2, Leeds United estates plans and the transformation of the city centre necessitate a longer term approach to health and care. Findings support our ambition to improve the health of the poorest the fastest and drive compassionate, inclusive economic growth.

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3. Leeds Academic Health Partnership 2017-2021 Strategy

Recommendations:
- To note the Leeds Academic Health Partnership Strategic Framework priorities, progress made by the Leeds Academic Health Partnership and its programme to deliver better health outcomes, reduced health inequality and more jobs and stimulate investment in health and social care within the Leeds Health and Wellbeing Strategy.

Update: LAHP Strategy was noted by the HWB. Following this, work has occurred with the health and care partners around identifying and progressing the key projects below:
- One workforce – Leeds Health and Care Academy is a new approach, supporting the move to One Leeds Workforce for the city working to integrate the learning and professional development of the city’s 57,000 health and care professionals, in collaboration with the city’s universities.
- Information and analytics – the LAHP is exploring the feasibility of establishing a legally, ethically and publicly acceptable framework in Leeds that enables health/care planning and research.
- Personalisation – Leeds Centre for Personalised Medicine and Health (LCPMH) develops and evaluates new personalised healthcare interventions, diagnostic tests, and treatments.
- Innovation in health and care
  - Leeds City Region heathtech integrated innovation system (LCR IIS): LCR academics, industry and health and care services collaborating to achieve inclusive economic growth and transformed service quality and efficiency.
  - UK heathtech sector collaboration: UK aims to be a global leader for innovative health technology. Providing oversight and governance to position LCR at the centre of UK collaboration.

4. Pharmacy Needs Assessment (PNA) 2018-21

Recommendations:
- To approve the PNA document ready for publication and placing on the Leeds Observatory website http://observatory.leeds.gov.uk/ by 1st April 2018.

Update: The PNA was approved by the Health and Wellbeing Board, published and placed on the Leeds Observatory as required by 1st April 2018. Since this time, it has been referred to a number of times to assist NHSE with applications for inclusion in a Pharmaceutical List.

On 12 December 2018, a presentation on the findings of the PNA was delivered to the Voluntary Action Leeds, BME Health and Wellbeing Group. This was very well received and resulted in a firm offer of assistance to reach more members of seldom heard BME groups when compiling the next PNA.

5. Progressing the NHS Leeds CCG Partnership Annual Report 2017-2018

Recommendations:
- To support the process for developing the CCG annual report as meet the statutory requirement outlined by NHS England.
- To acknowledge the extent to which the NHS Leeds CCGs have contributed to the delivery of the Leeds Health and Wellbeing Strategy 2016-2021.
- To agree to the formal recording of this acknowledgement in the NHS Leeds CCGs’ annual reports according to statutory requirement.

Update: NHS Leeds CCG annual reports – three for 2017-2018 as there were three statutory bodies during this financial year – included information about how the CCGs ‘contributed to the delivery of Leeds Health and Wellbeing Strategy. The content covering this section was circulated to members for updates and approval. All additional content was added as requested. The reports are available online: www.leedscrg.nhs.uk/about/annual-report-and-accounts/. The process is likely to be followed for 2018-19, subject to the guidance issued by NHSE.
**April 2018**

**Workshop session**

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<th>6. Priority 3: strong engaged and well-connected communities</th>
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<td><strong>Actions for consideration:</strong></td>
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<td>• Factor in the conversations and learning from the workshop into the process of the city’s ongoing integrated commissioning review.</td>
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<td><strong>Update:</strong> Development of an Integrated Commissioning Framework for Leeds is being led by the Leeds Health and Care Integrated Commissioning Executive (ICE) and is factoring in the learning from the workshop and well as broader engagement through the findings of the Big Leeds Chat.</td>
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<th>7. Priority 3: strong engaged and well-connected communities</th>
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<td><strong>Actions for consideration:</strong></td>
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<tr>
<td>• Review of mental health provision for at-risk groups.</td>
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<td><strong>Update:</strong> This is being included as part of the ongoing development of a collaborative 3-5 year Leeds mental health strategy, which will set out our priorities, key work streams and enabling programmes. An update will be provided to HWB in 2019.</td>
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<th>8. Priority 3: strong engaged and well-connected communities</th>
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<td><strong>Actions for consideration:</strong></td>
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<td>• Data entry/monitoring – For Gypsies and Travellers, poor data collection means they can feel invisible and creates difficulty to evidence whether services are effective/accessible. HWB agreed for this to be explored further and the actions to be taken to address.</td>
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<tr>
<td><strong>Update:</strong> All city wide referral forms now include the need for an interpreter to be recorded and the patient’s first language. Wherever possible this is automatically completed by the computer system when the referral form is produced. GP practices are required to collect this information. This information is also in the Leeds Care Record pipeline to be added to alerts in the future. Assurance has been received that GPs are able to and do routinely record ethnicity for Gypsies and Travellers, which is then available for city wide analysis.</td>
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<th>9. Priority 3: strong engaged and well-connected communities</th>
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<td><strong>Actions for consideration:</strong></td>
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<td>• Development of a simple briefing paper to communicate the changes to the NHS (Charges to Overseas Visitors) Regulations 2015 (“the Charging Regulations”) that became fully effective from October 2017 impacting migrant communities.</td>
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<tr>
<td><strong>Update:</strong> Following the establishment of the Migrant Health Board work is ongoing to communicate the changes and impact of the NHS (Charges to Overseas Visitors) Regulations 2015 with a broader update to be shared with HWB in 2019-20.</td>
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## 10. Priority 2 - An Age Friendly City Where People Age Well

### Recommendations:
- To recognise that the Age Friendly programme of work is a good example of partnership working to maximise impact and outcomes for the citizens of Leeds.
- To consider specifically how the partnership with the Centre for Ageing Better could use the findings from its research on community contribution to support ‘Leeds Left Shift’ ambition to motivate and boost the abilities of communities to increase wellbeing of local older people from BME communities.
- To consider how the partnership work on community transport could align with and strategically inform any future plans for transport within health.
- To consider what key issues are needed to shape the Information and Advice on Housing Options work programme, and specifically how this can be integrated with health and care services.

### Update: A review of the Age Friendly programme of work and plan has been undertaken. A key priority for 2019/20 includes work to further raise the profile of Age Friendly Leeds (supported by the Centre for Ageing Better).

Quarterly meetings of the Making Leeds the Best City to Grow Old In project board and the Age Friendly Leeds Partnership have been well attended by chief officers from across the council, representatives from Leeds Older People’s Forum and the Centre for Ageing Better. Partners have contributed to themed discussions at the board and partnership and the review of the action plan. A key priority for 2019/20 includes developing plans to identify how to best measure and demonstrate the impact and outcomes of the Age Friendly programme of work (supported by the Centre for Ageing Better).

Findings from the Centre for Ageing Better into community contributions research in Leeds confirmed high levels of community activity in the area and the City’s belief in the ABCD approach. Since the research the LCC is investing in at least one ABCD worker in Holbeck and Beeston. The findings were shared with third sector providers and volunteer managers, who are using them to bring funding into the city. Leeds Older People’s Forum ‘Street by Street’ project, started in December and is built on encouraging community contributions to support older people in three neighbourhoods in Leeds.

The Door to Door Community Transport project was successful in securing £339K to develop ways of working to use existing capacity in the passenger transport sector in Leeds to address unmet demand and reduce social isolation and improve access to health services amongst older people. Leeds CCG is represented on the programme board for the development of the initiative to ensure future plans for transport within health inform the work.

In June 2018, Centre for Ageing Better commissioned research into the Information and Advice needs of older people on their housing options. Researchers have talked to national and local providers and older people living in Leeds across tenure. Findings from the research are due to be published in February 2019 and will be discussed with health and care services.
11. Leeds Commitment to Carers

**Recommendations:**
- To note the progress to date that has been made by the Leeds Carers Partnership.
- To note the opportunity to advance the carers agenda provided by the development of Local Care Partnerships.
- To note that the Leeds Commitment to Carers is not the only way we are improving identification, recognition and support for unpaid carers in Leeds.
- To encourage Health and Wellbeing Board member organisations to promote the Leeds Commitment to Carers.

**Update:** Momentum and interest continues to grow with more organisations making a commitment to carers in Leeds. In 2018, there has been a significant focus on carers who are balancing work and caring (working carers) in partnership with the Leeds Working Carers Employers Network, a forum of Leeds based employers who are at the forefront of innovation and who are pro-active in supporting their working carers for the benefit of both the employee and employer. The new Information, Advice and Support Service in Leeds will have the lead responsibility for proactively promoting and coordinating the Leeds Commitment to Carers from April 2019.

Next steps are to develop a Leeds Carers Strategy, which will be developed during 2019 and presented to HWB for in 2019.

12. Update on the Leeds Cancer Programme

**Recommendations:**
- To note the progress, outcomes and actions taken to date in the Leeds Cancer Programme
- To note the contents of the discussions which may inform the development of a vision for cancer aware communities
- To support engagement with communities and constituents

**Update:** Leeds Cancer Programme celebrated its 18 month halfway point at an event at Shine, Harehills in November 2018. The event, which was opened by Cllr Rebecca Charlwood focused on sharing highlights and key successes and outlining programme ambitions until the end of March 2020. This included the programme bringing £4.5m worth of investment in Cancer services into Leeds to create pioneering system change working with public and patients at the heart of its plans. A short film, played at the event, showcased some of the city wide projects and achievements including working with diverse communities to build awareness of signs and symptoms of cancers; screening champions working across Leeds to improve uptake of national screening programmes and the implementation of Teledermatology services across Leeds focused on improving patient experience and speeding up diagnosis of skin cancers. The film is available to view here https://www.youtube.com/watch?v=xKB_owaU0E4.

Emerging ambitions for a ‘Cancer Aware Leeds’ includes plans to develop cancer aware communities, workforce and employers – this will require city wide partnership working across the breadth of stakeholder and community organisations across Leeds. Initiatives for 2019 include delivery of cancer aware training and skills across a wide range of health and care professionals as well as a network of community based screening and awareness co-ordinators.
### Recommendations:

- To retain an awareness of the importance and value of breastfeeding for the health and wellbeing of families today and for future generations.
- Noted the importance of promoting, supporting and protecting breastfeeding policy in all areas where appropriate.
- Considered and noted the impact of implementing the Code of Marketing of Breastmilk Substitutes - to protect babies and their families from harmful commercial interests.
- To take opportunities to promote a positive breastfeeding culture, to normalise and support city centre venues, public transport, and workplace.
- To be aware of challenges and opportunities and communicate these to the BFI Guardian.

**Update:** The theme for World Breastfeeding Week 2018 – Foundation for Life, was echoed throughout breastfeeding groups and children’s centre family sessions during the week in August 2018. An action plan to encourage greater sign up to Leeds is Breastfeeding Friendly scheme has been developed with goals set for wider reach, starting with LCC buildings. In October 2018, a celebration event was held in recognition of the Health Visiting service BFI Gold award achievement following a rigorous assessment in May, the service is only the second in the country to have achieved this new award. The BFI Guardians are paramount in the success and continuation of this award and they have been using opportunities in the role to promote the Leeds Breastfeeding Plan work and to share the successes and the need for progression with a wide range of stakeholders.

Leeds children’s centres have recently been awarded the Stage 1 accreditation evidencing that they have the right foundations to progress to full accreditation.

**Recommendations:**
- To note the content of the Annual Report of the Director of Public Health and support the recommendations on infant mortality, alcohol related mortality, female alcohol related mortality, male drug related deaths, suicides in men; and self-harm by young women.
- To request that Public Health consider the findings of the Public Health England national review into life expectancy and report back to the Board on any implications for Leeds.
- To seek to ensure that gender differences in health, experiences and outcomes are incorporated into the forthcoming Joint Strategic Assessment and the subsequent recommendations.
- To consider how Board member organisations currently reflect gender differences in health in their services and what further actions are needed in relation to the Director of Public Health report.
- To consider how Board member organisations currently reflect gender differences in health in their monitoring arrangements and what further actions are needed in relation to the Director of Public Health report.

**Update:** The State of Women’s Health in Leeds is being co-produced by Leeds City Council, Women’s Lives Leeds and academic partners for launch on International Women’s Day on 08 March 2019. This builds on ‘The State of Men’s Health in Leeds’. Both are important parts of the 2018/19 Joint Strategic Assessment and will help design and provide more gender sensitive services.

The Leeds Best Start/Implementation Plan has been refreshed and reflects recommendations on infant mortality. A drugs related deaths audit is being undertaken. To reduce drug related deaths there has been an enhancement of the drugs alert service, plus an extension of Naloxone provision to counter overdoses. A responsible drinking campaign No Regrets has been successfully launched for 18-25yr olds using insight from women. Leeds City Council has funded, via Leeds Community Foundation, targeted grants to local charities and community groups to help men at higher risk of suicide for example by using support networks and developing social activities.


NHS Leeds CCG uses the NHS Equality Delivery System 2 jointly with LTHT, LCH, LYPFT and some third sector organisations. This is a tool to measure and improve equalities improvement and is a city wide approach. NHS Leeds CCG has a high level commitment in its strategic plan 2018-2021 to work with partners to focus resources to deliver better outcomes for people’s health and wellbeing, and reduce health inequalities across the city.
15. Local Care Partnerships (LCPs)

**Actions for consideration:**
- Develop the tools needed to effectively communicate about LCPs within their organisations and communities.
- Identify areas work that will need to take into account the LCP model going forward.
- Factor in LCPs into the city’s ongoing integrated commissioning review.
- Ensure that the system allows genuine co-production with local people empowered through ‘Better Conversations’ and engagement to generate local solutions.

**Update:** Local Care Partnership (LCP) is the term adopted in Leeds to describe a model of integrated joined-up working with teams delivering local care for local people; working in and with local communities working to the vision of the Leeds Health and Strategy. What works in one part of the city may not work elsewhere so LCPs will form and shape in response to local need and the features of the communities they serve, recognising the diversity that exists across our city. Based on these features, Leeds are progressing the development of 18 Local Care Partnerships across the city, developed from local neighbourhoods / communities. Development of the LCPs are ongoing as part of the emerging formal programme governance of LCPs under the auspices of the ‘Leeds Providers’ Integrated Care Collaborative’, which has identified implementation and acceleration of LCPs as a key priority.

- Plans are progressing to identify how to best utilise the investment to accelerate development. This includes investment to create a central capacity to work in and with LCPs, support development.
- LCP Leadership Team meetings are happening in most localities with broad representation.
- Engagement with across Leeds on LCPs with people and staff.
- Work is ongoing to ensure that LCPs are linked to Priority Neighbourhoods, Population Health Management and our approaches to Better Conversations.

16. Strengthening our Leeds Health and Care Workforce

**Actions for consideration:**
Ensuring that Leeds has the right mechanisms in place to promote the physical and mental health of staff and are enabled to provide care in the right place through Local Care Partnerships. This included:

- Ensuring that the ‘Better Conversations’ approach and support given to the public also takes place for staff.
- Importance of having a greater health and care focus on prevention rather than reactive for the workforce.
- Recognition of the sheer volume of work in the system and making best use of existing techniques and resources to support staff.
- Using existing expertise in the city (e.g. Mindful Employers) to support the physical and mental health of staff.
- Positive messages and stories to motivate and give confidence to staff.

**Update:** Work is ongoing to develop a citywide health and care workforce strategy, which will be presented to HWB in 2019. It will reflect the feedback provided, but also recognises the additional context provided through the development of the Leeds Joint Strategic Assessment, NHS Long Term Plan and the CQC Local System Review, which looked at how well the whole health and care system in Leeds provides for the needs of our residents, specifically focussing on those aged over-65.
17. Priority 4 - Housing and the Environment Enables all People of Leeds to be Healthy

Recommendations:
- To note the Board’s suggestions to further integration between housing, environment and health partners at both strategic and operational levels.
- To note the Board’s discussions around priority areas for future consideration and collaboration on housing issues which have an impact on health.
- To agree to use the learning from the NHS England Healthy New Towns and best practice (including Wakefield Housing, Health and Social Care Partnership) to provide strategic direction and influence for partners including the NHS, Local Care Partnerships, LCC Planning and Highways.
- To endeavour to help drive the work forward locally and regionally in line with a Health in all Policies approach and the Leeds Health and Wellbeing Strategy.
- To note the aims, principles and progress of the Planning and Design for Health and Wellbeing group to date.

Update: Work has been progressing to further integration between housing, environment and health partners at both strategic and operational levels and as a result forms a key section of the draft Leeds JSA 2018. Feedback has been used to inform the Leeds Our Spaces Strategy, promote a Health in all Policies approach with the Health and Wellbeing Strategy and Inclusive Growth Strategies recognised as key drivers of the Best City Priorities. Progress includes:
- Ongoing work from the Planning and Design for Health and Wellbeing Group to implement and embed our principles of active neighbourhoods, better air quality and green space, cohesive communities.
- Good quality housing is a pre-requisite for good health, as a result, Area Housing Managers are now aligned with each of our Local Care Partnerships to promote closer working.
- Establishment of a health and housing sub group of the West Yorkshire and Harrogate Health and Care Partnership. In addition to sharing best practice the group will be supported by the Academic Health Science Network to evaluate the health outcomes of different approaches to housing with a view to being able to present a strategic case for change to the way we plan for and invest in health housing across our organisational boundaries.


Recommendations:
- To note the Board’s discussion in relation to the action the HWB can take collectively and at organisational level to help achieve the outcome that ‘people in Leeds are safe and feel safe in their homes, in the streets and the places they go’.
- To note the Board’s discussion in relation to the consultation on the strategy as part of the HWB’s role in providing strategic, place-based direction around wider determinants of health, linked to the Leeds Health and Wellbeing Strategy.
- To note feedback provided on pertinent issues that support on-going discussions around ‘system changes’ and ‘operational response’; where improving health and wellbeing outcomes are directly connected to community safety priorities.

19. West Yorkshire and Harrogate Health and Care Partnership Update

Recommendations:
- To agree to sign up to the spirit and content of the Memorandum of Understanding (MoU).

Update: The final draft of the MoU has now been agreed by all governing bodies in the West Yorkshire and Harrogate Partnership. The MoU includes the agreement to develop two additional bodies at West Yorkshire and Harrogate level. The overarching Partnership Board – which will include the senior executive and non-executive leadership from each partner organisation, and will be chaired by a Health and Wellbeing Board chair. There will also be a Systems Oversight and Assurance Group which will include a representative group covering each place-system and each major sector. These will be active in 2019.

20. Leeds System Resilience Plan

Recommendations:
- To note the Board’s feedback and comments on the approach to developing the Leeds System Resilience Plan.

Update: The Leeds health and care system continues to work in partnership to address its challenges. The Leeds System Resilience Plan will continue to be the vehicle to ensure a system wide approach of collaboration and strong leadership from both a strategic and operational perspective for transformation of urgent and emergency health and care services.

The ongoing evaluation of our interventions will continue to inform our short, medium and long term plans to ensure to maximise all available opportunities to improve the experience and outcomes for our population with a review to take place in April 2019.

21. Arts and Health and Wellbeing

Recommendations:
- To note the powerful contribution the arts can make to health and wellbeing.
- To agree to support and develop within direct provision and commissioned services art interventions as a tool to meet health and wellbeing outcomes.
- To agree to influence arts based commissioning and arts organisations to have a stronger focus on improving health and wellbeing.
- To support the establishment of an Arts and Health and Wellbeing Network in the city.
- To note that Jim Barwick was identified as the lead champion from the Health and Wellbeing Board to support this work.

Update: Work has progressed in establishing a Leeds Art and Health & Wellbeing Network. An initial steering group has been established to oversee the work, with representatives from the Cultural Institute at Leeds University, Leeds Beckett University, Leeds City Council Arts staff, Adults and Health, the HWB, and representatives from a range of arts organisations in the city. An event to shape and launch the Network occurred on Thursday 24 January 2019.

Findings from the network will also contribute to a wider programme of work, including a major conference at the University of Leeds in June 2019 focusing on arts and health activity for and by children and young people. Positively, even before the Network is established, the proposal has helped initiate a range of activity in the area of Art and Health, from Leeds Based Digital Artists Invisible Flock securing funding to work with the Dementia Peer Support Service in Leeds, to Art work from the Mental Health Day services to be hung in the Leader of Leeds City Council’s office.
October 2018

Workshop session

22. Working with communities: Improving the health of the poorest the fastest

Recommendations:
- Continue to build on and strengthen the relationship between the Leeds Health and Wellbeing Strategy and the Inclusive Growth Strategy.
- Continued commitment to progressing Local Care Partnerships
- Targeting support in Priority Neighbourhoods considering opportunities to target efforts in communities who need to see the greatest and fastest improvement.
- Engage, contribute and take action on the workstreams of the Child Poverty Impact Board.
- Factor in the conversations and learning from the workshop into the JSA process, refresh of the Leeds Mental Health Framework and integrated commissioning framework.

Update: Work continues to progress in strengthening the linkages between Leeds Health and Wellbeing Strategy and the Inclusive Growth Strategy, particularly around tackling poverty, and the relationship between HWB and the developing Inclusive Growth Partnership Board.

Leeds continues to be committed to Local Care Partnerships and targeting support in the LCC led Priority Neighbourhoods with closer working occurring with member organisations identifying opportunities. For example, the positive work of LTHT and others to develop an Inclusive Anchors Network.

Learning has been fed into the development of the draft JSA, refresh of the Leeds Mental Health Strategy and Leeds Integrated Commissioning Framework.

November 2018

Health and Wellbeing Board: Board to Board Session

23. People’s Voice Group (PVG) Update: Big Leeds Chat

Actions to consider:
- Use the findings from the Big Leeds Chat to inform our strategy and plans locally and regionally.
- Reiterate their commitment to the wider determinants of health that was a clear theme of the feedback received.
- Have items focused on the key issues raised at future health and care partnership boards/groups.
- Support future Big Leeds Chat events and explore how they can occur in different communities across Leeds.

Update: On the 11 October 2018 the first Big Leeds Chat took place in Kirkgate Market. Since the event, there has been significant interest and energy in the Big Leeds Chat concept from within Leeds, regionally and nationally. As well sharing the findings with health and care partnership boards/groups, we have been approached about applying the idea to several different programmes such as Active Leeds and conversations about how this might work at a LCP level as well. We have also been approached by other West Yorkshire and Harrogate areas about sharing the learning as they had been looking to do something similar. On a national level, NHS England have asked us to do an online seminar as well as exploring opportunities to develop the idea further in Leeds.

**Actions to consider:**
- Ensure that our approach to estates are in line with the ambitions and vision of the Leeds Health and Wellbeing Strategy, Leeds Health and Care Plan and contributes to the Leeds Inclusive Growth Strategy through a whole systems approach.
- Commitment to engage and support the development of the community estates strategy.
- For an update at a future HWB meeting.

**Update:** A working group of the Strategic Estates Group has been established with representation from providers and commissioners to take forward the development of a Community Estates Strategy. The Strategic Estates Group will agree the overall scale of ambition, as well as the framework for the document in February/March 2019, with the finished strategy expected by mid-2019.

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**December 2018**

**Public meeting**

25. Joint Strategic Assessment (JSA) Update

**Recommendations:**
- To note the initial findings and structure of the draft report, including linkages to the wider Observatory and existing/planned Health Needs Assessments.
- To note the Board’s comments and suggestions in relation to the draft JNA.

**Update:** The draft JSA was noted by HWB and work is ongoing to finalise the JSA with members’ feedback taken into account. Further exploration is occurring on ensuring that the JSA is connected to the LCC led priority neighbourhoods approach to help us better understand the assets and needs of our poorest neighbourhoods and to target our work with people in these places – all based on what people are telling us.

Positively, the JSA continues to strengthen linkages between the Leeds Health and Wellbeing Strategy and Inclusive Growth Strategy and forms an essential part of the refresh of the Best City Priorities. The priority neighbourhood’s framework provides the opportunity to target partner efforts in those communities who need to see the greatest and fastest improvement.
### 26. Priority 8 - A Stronger Focus on Prevention – Local Government Healthy Weight Declaration

**Recommendations:**
- Support and champion the Healthy Weight Declaration, Physical Activity conversations and evolving Social Movement and the Mental Health Prevention Concordat.
- Explore adopting the Healthy Weight Declaration within their own organisations.
- Support the development of a new physical activity ambition and Social Movement for Leeds.

**Update:** A launch event occurred on 1 February 2019, which will provide the opportunity for LCC to receive the Healthy Weight Declaration certificate. This will be an opportunity to highlight the work being done to reduce obesity and to publicise the key services that can offer support to those wishing to achieve a healthy weight. The event aims to kick-start some of the local priorities and greater engagement with partners to progress formally supporting and committing to the Declaration recognising the range of work already occurring across the Leeds health and care system. This includes further strengthening the positive work occurring with the Leeds Academic Health Partnership’s (LAHP) Strategic Framework priority of ‘A good start in life: obesity’.

An LCC Healthy Weight Declaration working group chaired by Public Health has been established and is responsible for delivering the operational tasks needed to enable LCC to adopt the Declaration. This working group reports to the Child Healthy Weight Partnership, which will monitor progress and provide the governance oversight and link to the Health and Wellbeing Board and Children and Families Trust Board. Individual members of the HWD working group and the Child Healthy Weight Partnership will link back to the wide range of other partnerships (e.g. Planning and Design Partnership, Human Resources Health and Wellbeing Group, Leeds Food Partnership, Physical Activity Steering Group).

Going forward, an annual Healthy Weight Declaration work programme will be developed and delivered taking into account the feedback received from HWB. An initial review of progress towards achievement of the Healthy Weight Declaration standard and local commitments will be undertaken in 2019.

### 27. Priority 8 - A Stronger Focus on Prevention – Physical Activity Approach

**Recommendations:**
- Support and champion the Physical Activity conversations and evolving Social Movement.
- Support the development of a new physical activity ambition and Social Movement for Leeds.
- Help influence a whole city (or system) approach to Physical Activity, designed to make it easy for people to be active.

**Update:** Work is ongoing to progress the creation of a social movement to get more people, more physically active, more often. This proposal has two distinct components which will be developed through 2019:

1. **Promoting a physical activity conversation across the city,** we will make it as easy as possible for the people of Leeds to be part of this ‘chat’. We will talk with individuals, communities, organisations and policymakers to understand more about people’s attitudes to activity, their understanding of its benefits, its role in their lives and how living and working in Leeds affects their levels of activity. We want people to think about what Leeds would be like if it was the perfect place for them to be active.

2. **Following the strategic direction detailed above and using this learning and the relationships developed,** an ambition and action plan for increasing physical activity in Leeds will be co-produced.
### 28. Priority 8 - A Stronger Focus on Prevention – Mental Health Prevention Concordat

**Recommendations:**
- Support and champion the Mental Health Prevention Concordat.
- To take note of Leeds City Council’s signing of the Prevention Concordat for Better Mental Health.

**Update:** The Prevention Concordat as a positive endorsement of the work across the city on our ambitious and broad commitment to improving mental health and wellbeing across Leeds, and reducing poor mental health outcomes. It will also give us an opportunity to address any gaps and needs that are not being met on this agenda and be driven by the Health and Wellbeing Board.

The Mental Health Strategy for Leeds is being refreshed and the scope will include prevention of poor mental health, mental health promotion and building on protective factors that help keep us mentally well. The Concordat will be an opportunity to link this work across the city.

### 29. Leeds Health Protection Board - Annual Report

**Recommendations:**
- Strengthening links with the Leeds City Council’s Priority Neighbourhoods.
- Ensuring the health challenges with the migrant population in Leeds are included as part of a future update on the Migrant Health.
- To agree the priorities identified by the Health Protection Board for 2018/20 and note the work occurred over the previous year.

**Update:** HWB agreed the priorities for the Health Protection Board for 2018/20. Work is ongoing to strengthen and embed working with the Child Poverty Improvement Board, Priority Neighbourhood and Migrant Health Board.
Progress around our Leeds Health and Wellbeing Strategy indicators

Measuring our impact
The intent of the Leeds Health and Wellbeing Strategy indicators is to act as ‘bell weather’ measures on the basis if they are moving in the right direction the overall system (including a range of supporting and related measures) will also be improving. They are presented as an overview of how well we are doing, recognising the extensive intelligence that sits behind them and promoting conversation.

Overall, there is good progress with Leeds comparing well with other Core Cities and with areas that reflect the scale and diversity of Leeds and the nature of disadvantage that exists within the city. However, in Leeds we recognise that there is still more to be done. Inequality of outcomes and the impact of poverty and disadvantage remain evident with some stubborn challenges. These won’t be addressed in isolation. There is evidence of an intensification of inequalities, confirming the very dynamic and multi-faceted challenges often in our most deprived communities and supports our commitment to wider determinants of health and to continue to strengthen our collaborative working through a ‘Leeds Left Shift’ – particularly at either end of the age-spectrum.

<table>
<thead>
<tr>
<th>Measure</th>
<th>2015-16</th>
<th>2016-17</th>
<th>2017-18</th>
<th>2018-19</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of physically active adults (Periods of moderate activity of 10 mins or more in a week, active 150 mins+, fairly active 30-149 mins, inactive less than 30 mins)</td>
<td>New Measure</td>
<td>27.2% inactive Nov 2016</td>
<td>24.5% inactive May 2017</td>
<td>23.7% inactive May 2018</td>
<td>25.2% inactive 62.3% active</td>
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<tr>
<td>Avoidable years of life lost (DSR per 100,000)</td>
<td>5515 per 100,000 2014-16</td>
<td>20.9% Q2 2015-16</td>
<td>20.4% Q2 2016-17</td>
<td>19.7% Q2 2017-18</td>
<td>19.0% Q2 2018-19 Local measure</td>
</tr>
<tr>
<td>% of adults over 18 that smoke</td>
<td>New Definition</td>
<td>New Definition</td>
<td>61.6</td>
<td>59.6</td>
<td></td>
</tr>
<tr>
<td>Proportion of people feeling supported to manage their condition (NHSOF 2.1: GP Survey)</td>
<td>New Definition</td>
<td>New Definition</td>
<td>61.6</td>
<td>59.6</td>
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*Where data is available it will most often be provisional

In considering adult health outcomes:

- After 2 periods of reducing rates avoidable potential life years lost levelled off in 2013-2015 and then saw a slight increase in 2014-16. The increase is greater in deprived Leeds (9363) and the rest of Leeds (4600) has widened.
- Leeds Life Expectancy at birth is lower than the England average, but the 3rd highest Core City. 2014-16 shows life expectancy at birth in Leeds at 81.7 female and 79.8 male, these rates are largely stagnate, similar to national, and deprivation gaps are not closing.
- Adult smoking prevalence in the 18+ population is consistently reducing. As a consequence of lower smoking prevalence there has been a slow reduction in mortality from smoking attributable deaths in Leeds. While the rate of reduction is greater in deprived Leeds the rate in these communities remains well above the city average. Leeds smoking prevalence is higher but not significantly so than England.
- The latest national Sport England Active Lives Survey represents 20,100 fewer people in Leeds being considered inactive than the November 2016 results. Leeds has the biggest decrease in the percentage of inactive people of the Core Cities, and the second lowest inactivity levels of Core Cities. Active Leeds are commissioning research to generate a better understanding of physical activity in priority localities.
- GP Survey results show 61.6% of Leeds adults with long term conditions are confident in their management - above the national rate of 59.6%. Nationally, satisfaction increases with age.
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<tr>
<th>Measure</th>
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<th>2017-18</th>
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<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delayed Transfer of Care for 18+ Average number of bed day delays per day by 100,000</td>
<td>15.0</td>
<td>12.7</td>
<td>16.9</td>
<td>13.4 (Dec 18)</td>
<td>12.3 (17-18) 9.5 (Dec 18)</td>
</tr>
<tr>
<td>Number of bed weeks care in residential and nursing care homes for people 65 and over supported by the local authority</td>
<td>131,369</td>
<td>129,846</td>
<td>119,498</td>
<td>120,246 (Dec 18 estimate)</td>
<td></td>
</tr>
<tr>
<td>Emergency admissions for acute conditions that should not usually require hospital admission (per 100,000)</td>
<td>1353.1</td>
<td>1464.9</td>
<td></td>
<td>1395.3 2016-17</td>
<td></td>
</tr>
<tr>
<td>% of emergency admissions to any hospitals within 30 days of discharge from hospital**</td>
<td>Leeds CCGs North 12.0 Sth East 13.5 West 12.2</td>
<td>Leeds CCGs North 12.2 Sth East 13.1 West 12.0</td>
<td>Leeds CCGs North 12.2 Sth East 12.7 West 12.5</td>
<td>13.8 2017-18</td>
<td></td>
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</table>

*Where available data will most often be provisional  
**Standardised by age, sex, method of admission & diagnosis/procedure. Cancer & obstetrics excluded.

The number of bed weeks in residential provision supported by the local authority for people 65 and over is reducing, as are admission rates which reduced in 2017-18 to be effectively in line with England and have since reduced further. The reduction in admission rates over of the previous 4 years is linked to a more community focused, strength based and preventative approach as articulated in our strategies and plans.

Delayed Transfers of Care (DTOC) remain a challenge as reflected in the recent CQC Local System Review. Work to improve pathways out of hospital into appropriate settings is progressing, including aiding effective and appropriate patient choices, the latest nationally published monthly DTOC figures for December show an improvement.

Availability for long term care and especially nursing care for people with complex, high needs including behavioural needs is a challenge. Information on emergency admissions for acute conditions that should not usually require hospital admission is available for 2016-17 when Leeds rates had slightly increased to a rate above national and fourth amongst Core Cities. In March 2019 figures were published for the percentage of emergency admissions to any hospital in England occurring within 30 days of the last, previous discharge from hospital. There is an ongoing review of emergency readmissions indicators, many of which have not been published since 2014. The publication is based on standardised measures and the previous Leeds CCG boundaries. For 2017-18, Leeds rates were below the all England figure, this is consistent with previous years.
### Measure

<table>
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<tr>
<th>Measure</th>
<th>2015-16</th>
<th>2016-17</th>
<th>2017-18</th>
<th>2018-19*</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant mortality rate</td>
<td>4.4</td>
<td>4.1</td>
<td>3.9</td>
<td>3.9</td>
<td>3.9</td>
</tr>
<tr>
<td><em>(Deaths prior to 1st birthday per 1,000 live births, 3 year averages)</em></td>
<td>2014-16</td>
<td>2015-17</td>
<td>2015-17</td>
<td>2015-17</td>
<td>2015-17</td>
</tr>
<tr>
<td>Educational outcomes at 16</td>
<td>-0.06</td>
<td>0.07</td>
<td>-0.02</td>
<td>-0.02</td>
<td>-0.02</td>
</tr>
<tr>
<td><em>(Progress 8 measure academic year)</em></td>
<td>2015-16</td>
<td>2016-17</td>
<td>2017-18</td>
<td>2017-18</td>
<td>State funded</td>
</tr>
<tr>
<td>Excess weight in 10-11 year olds school years</td>
<td>32.98</td>
<td>35.41</td>
<td>33.49</td>
<td>34.01</td>
<td>34.32</td>
</tr>
<tr>
<td>% of young people reporting they are happy or very happy with the number of good friends they have</td>
<td>Primary 83.4% Secondary 82.0%</td>
<td>Primary 81.5% Secondary 80.3%</td>
<td>Primary 82.3% Secondary 78.7%</td>
<td>Local Measure</td>
<td></td>
</tr>
</tbody>
</table>

*Where data is available it will most often be provisional*

The Leeds infant mortality rate is reflective of wider child outcomes:

- The latest three year averages shows a reduction in the rate for Leeds overall from an increase in the previous period. The Leeds rate while above is not significantly different to the England average – is the third lowest rate amongst Core Cities.
- The rate is greater in deprived areas of Leeds. It reinforces our approach around Best Start to continue to help ensure that parents are well prepared for pregnancy and that families with complex lives are identified early and supported.

The national child measurement programme measures children in reception and year 6 classes, ages 5 and 11:

- For the 2017-2018 school year 34% of year 6 children were overweight including 19.1% who were obese, with 1.1% of children underweight.
- Again there is a relationship with deprivation, in 2016-17 the Leeds deprived rate was 40.8%. In reception 22.5% of Leeds children were overweight in 2017-18.
- Leeds results are similar to England at both ages, this is reflected in local authority rankings of 61st at year 6 and 71st in reception.

In the 2017-18 school year, 17,176 school year 5, 6, 7, 9 and 11 children participated in the Leeds My Health My School Survey:

- The majority of children and young people are happy or very happy with the number of good friends they have.
- More children in primary schools say they are very happy compared to young people in secondary schools.
- Girls were slightly less likely to respond that they are very happy compared to boys.

Learning outcomes for children follow a similar pattern. Secondary pupils make progress in line with children attending state funded schools nationally. While overall Leeds children achieve good learning outcomes, these need to improve at all ages for children from disadvantaged backgrounds and to translate into improved education, employment and training (EET) opportunities beyond 16. Underpinning this is the Children & Young People’s Plan ‘3 A’s Obsession’ (attendance, attainment and achievement) that children are in learning and safe, that they are making good progress in their learning and that they have the rich experiences that support fulfilling childhoods and prepare them for later life, increasing the likelihood of positive health and wellbeing outcomes.
<table>
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<th>2018-19*</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young people who are not in employment, education or training (NEET)</td>
<td>New Measure</td>
<td>6.0%</td>
<td>7.0%</td>
<td></td>
<td>6.0%</td>
</tr>
<tr>
<td><em>(Dec-Feb average for young people age in school years 12 and 13)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2017-18</td>
</tr>
<tr>
<td>Leeds residents earning below the Living Wage Foundation's real living wage</td>
<td>61,258</td>
<td>64,862</td>
<td>64,819</td>
<td>67,035</td>
<td>22%?</td>
</tr>
<tr>
<td></td>
<td>19.7% of FTEs</td>
<td>20.4% of FTEs</td>
<td>19.8% of FTEs</td>
<td>20.5% of FTEs</td>
<td></td>
</tr>
<tr>
<td>Jobs in the Leeds economy private sector</td>
<td>363.0 thousand 2015</td>
<td>366.4 thousand 2016</td>
<td>377.2 thousand (2017 provisional)</td>
<td></td>
<td>30.1 gap</td>
</tr>
<tr>
<td>Gap in the employment rate between those in contact with secondary mental health services and the overall employment rate Percentage point gap</td>
<td>23.9 gap 2014-15 Q1</td>
<td>30.4 gap 2016-17 Q1</td>
<td>27.3 gap 2017-18 Q1</td>
<td>22.2 gap 2018-19 Q1</td>
<td></td>
</tr>
<tr>
<td>Number of houses in fuel poverty</td>
<td>13.5% 43,871 households 2015</td>
<td>13.1% 42,929 households 2016</td>
<td></td>
<td>11.1% 2016</td>
<td></td>
</tr>
</tbody>
</table>

*Where data is available it will most often be provisional*

The Leeds economy continues to grow and there are genuine strengths in our overall levels of employment:

- There is continued growth in high quality jobs in digital, health, social care, professional and managerial roles.
- 80% of the working age population are economically active, well above regional and national averages, similarly the city’s unemployment rate is relatively low slightly above national but amongst the lowest of the core cities.
- 444,000 people work in Leeds, of which around three quarters are employed in the private sector, putting the city in the top 5 nationally for private sector employment.
- Despite our relatively high levels of employment, like other northern cities our productivity remains a key issue. Average weekly earnings for those working in Leeds are close to the national average at £552 per week, for workers who live in Leeds the workplace average is £548.
- The relatively strong performance masks some significant inequalities in the labour market, this includes in work poverty and concerns in the ‘hollowing-out’ of skilled and semi-skilled occupations increasing across a wider range of sectors.
- Estimates for Leeds people earning below the Real Living Wage are calculated based on the rate in place at time of the ASHE survey results, the 2018 figure was £8.75, 2017 £8.45. The ASHE survey sample of job counts is a broad estimate of employee jobs, from this it is further estimated that in 2018 the proportion of people earning below the Real Living Wage was:
  - 20.5% or 67,035 FTE Leeds working residents a 0.7% increase from 2017; 11.6% of full time working residents (27,427) and 43.6% of part time working residents (40,133).
  - 20.5% or 82,820 FTE Leeds workers a 2.0% increase from 2017; 11.1% (32,556) full time workers and 45.2% (50,129) part-time workers.
For young people soon to enter the labour market there is a continued focus on ensuring improved education, employment and training (EET) opportunities beyond 16. In 2017-18 for young people aged 16 and 17, age the proportion of young people NEET or status not known (fulfilment of tracking duty) was above national but below the core cities average in the national measuring period, December to February. As part of a regional consortium bid, Leeds has been successful in applying to the European Structural and Investment bid for work with NEET young people, to offer them effective targeted information, advice and guidance and to support them into appropriate EET opportunities. Leeds has a comparatively low gap for the employment of people in contact with secondary mental health services being the best of the core cities and below the national gap. While subject to period on period variation, in part due to data issues, the overall direction is positive, cohort represents approximately 9% of workforce.

Last estimates for fuel poverty show the Leeds rate above national, primarily due to the nature of the housing stock but below the core city rate. Leeds is undertaking a number of targeted schemes designed to make it easier for people to heat their homes affordably these include advice and heating / insulation improvements.

<table>
<thead>
<tr>
<th>Measure</th>
<th>2015-16</th>
<th>2016-17</th>
<th>2017-18</th>
<th>2018-19*</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased self-reporting of domestic violence and abuse incidents <em>(Rolling 12 months)</em></td>
<td>Not available</td>
<td>31.6% of 18,957 (12 month 04-17)</td>
<td>30.3% of 20,953 (12 month 04-18)</td>
<td>31.9% of 21,880 (12 month 12-18)</td>
<td>Local measure</td>
</tr>
<tr>
<td>Incidents of hate crime <em>(Rolling 12 months)</em></td>
<td>1,726 12m 03-16</td>
<td>2,192 (12 month 03-17)</td>
<td>2,432 (12 month 04-18)</td>
<td>3,045 (12 month 12-18)</td>
<td>Local measure</td>
</tr>
</tbody>
</table>

*Where data is available it will most often be provisional

We need people to feel safe and to be safe in Leeds communities and have the confidence to reach out when this is not the case. 2016/17 Home Office figures highlighted 21 per thousand population domestic abuse incidents and offences in West Yorkshire compared to a rate of 18 per thousand population in England & Wales. A key aspect of addressing this is victim confidence to report domestic abuse. There has been a positive increase in the volume of domestic incidents reported by the victim within the context of the total volume of reported incidents also increasing.

Leeds City Council and NHS Leeds CCG continue to work together to support individual GP surgeries to implement the recommendations from Domestic Homicide Reviews and Lessons Learned Reviews:

- GPs are notified of concerns for all victims identified at the daily domestic violence meetings.
- In 2018 there were 3302 notifications to GP’s.
- The school notification process has been in place since April 2016, there has been over 12,939 notifications completed to schools.
- There has been a continued increase in the number of MARAC referrals from GPs and ongoing enquiries in relation to victims.
- Domestic Violence training continues to be promoted and delivered across the health sector in Leeds.

There has also been an increase in the reporting of hate incidents (a hate incident is any incident reported which is perceived by the victim or any other person, to be motivated by a hostility or prejudice based on a person's disability, race, religion, sexual orientation or gender identity):

- 2017-18 saw a rise of 11% with 1,892 Race, 280 Sexuality, 258 Disability, 168 Faith, and 51 Transphobic hate incidents reported. This increase has continued into 2018-19.
The Safer Leeds Hate Crime Strategic Board Action Plan works to strengthen our hate incident reporting infrastructure, and to provide those wishing to report a genuine choice as to where they can report.

Hate crimes and incidents can be reported directly to the Police, Leeds City Council’s hate incident reporting centres, or to a number of third party reporting providers including Stop Hate UK (a Safer Leeds commissioned service), Tell MAMA, MESMAC, and Hamara. Reports can also be made via the Police funded website TrueVision.

The Hate Crime Strategic Board is responsible for the strategic management of the ‘Leeds Hate Crime Strategy’. Hate crimes cause victims greater distress than similar crimes without the same motivation (Home Office, Action against Hate). The Board works closely with Victim Support and Witness Care services to ensure victims of hate crime are supported through any enforcement process.

The Leeds Anti-social Behaviour team co-ordinates work within the Local Authority. Actions taken to support victims include: Refer to Victim Support, and Refer to Hate Crime MARAC. Intervention and enforcement action taken within the in respect of Hate related cases include: Seek possession of tenancy; Formal Housing Caution; Injunction; Refer to Youth Offending Team; Noise Monitoring Equipment installed; and CCTV Request made.
Want to know more?